

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.  | DATE     |
|---------------------------|----------|---------|----------|
| FEE DETERMINATION         |          |         |          |
| O.I.P.E. CLASSIFIER       | GUN      | 11      | 2/1/01   |
| FORMALITY REVIEW          | B2       | TC3-883 | 02-26-01 |
| RESPONSE FORMALITY REVIEW | A-M      | JC 580  | 06-06-01 |
|                           | A-M      | JC 580  | 09-14-01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date    |
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| Final Original |         |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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Best Available Copy

7/14/01